

BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY

Meeting Date: December 21, 2005

Division: Budget and Finance

Bulk Item: Yes ☒ No ☐

Department: Grants

Staff Contact Person: David P. Owens

AGENDA ITEM WORDING: Approval of amended Attachment D to contract with Guidance Clinic of the Middle Keys, which concerns subcontracted Baker/Marchman Act transportation.

ITEM BACKGROUND: Attachment D that was approved at October meeting was copy of last year's; new agreement for transportation was under negotiation at that time.

PREVIOUS RELEVANT BOCC ACTION: approval of contract at October 2005 meeting.

CONTRACT/AGREEMENT CHANGES: see attached comparison

STAFF RECOMMENDATION: Approval.

TOTAL COST: 847,054.00

BUDGETED: Yes ☒ No ☐

COST TO COUNTY: 847,054.00

SOURCE OF FUNDS: ad valorem taxes/general fund

REVENUE PRODUCING: Yes ☐ No ☒

AMOUNT PER MONTH _____
YEAR _____

APPROVED BY: COUNTY ATTY ☒ OMB PURCHASING ☐ RISK MANAGEMENT ☐

DIVISION DIRECTOR APPROVAL: _____


Salvatore R. Zappulla

DOCUMENTATION: INCLUDED: ☒ NOT REQUIRED: ☐

DISPOSITION: _____

AGENDA ITEM #: _____

| paragraph | old | new |
|------------------|-----------------------------------|---------------------|
| 1 (term) | no changes | no changes |
| 2 (vehicles) | one from GCMK; one from Elanjess | two from GCMK |
| 3 (fuel/maint) | GCMK fuel; Elanjess maint | GCMK fuel and maint |
| 4 (insurance) | Elanjess | GCMK fuel and maint |
| 5 (liability) | Elanjess 100K/200K | GCMK |
| 6 (cell phone) | Elanjess | not addressed |
| old | | |
| max trips | | cost |
| 325 | any in-county | 140.00 |
| 85 | any out-of-county | 430.00 |
| new | | |
| 300 | within KW or within Mthn | 115.00 |
| | between KW/Mthn or Mthn/KL | 145.00 |
| 40 | Mthn to Dade or KL to Dade | 385.00 |
| 25 | KW to Dade | 385.00 |
| 3 | KW to KL (client Mthn or north) | 225.00 |
| 5 | KW to Dade (client Mthn or north) | 385.00 |

MONROE COUNTY BOARD OF COUNTY COMMISSIONERS

CONTRACT SUMMARY

Contract # _____
 Contract with: Guidance Clinic of the Middle Effective Date: 10/01/05
Keys
 Expiration Date: 9/30/06
 Contract Purpose/Description: amendment to Attachment D, which concerns Baker/Marchman Act subcontract of transportation services.
 Contract Manager: David P. Owens 4482 OMB/Grants
 (Name) (Ext.) (Department)
 for BOCC meeting on 12/21/05 Agenda Deadline: 12/06/05

CONTRACT COSTS

Total Dollar Value of Contract: \$847,054.00 Current Year Portion: \$847,054.00
 Budgeted? Yes ☒ No ☐ Account Codes: 001-03230-530340- 385,961.00 ✓
 Grant: \$0.00 001-01509-530340- 46,179.00 ✓
 County Match: \$ _____ 001-01526-530340- 86,287.00 ✓
001-01508-530340- 328,627.00 ✓

ADDITIONAL COSTS

Estimated Ongoing Costs: \$ _____/yr For: _____
 (Not included in dollar value above) (eg. maintenance, utilities, janitorial, salaries, etc.)

CONTRACT REVIEW

| | Date In | Changes Needed | Reviewer | Date Out |
|-------------------|----------------|---|--------------------|----------------|
| Division Director | <u>12/5/05</u> | Yes <input type="checkbox"/> No <input type="checkbox"/> | <u>[Signature]</u> | <u>12/5/05</u> |
| Risk Management | <u>12-1-05</u> | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | <u>[Signature]</u> | <u>12-1-05</u> |
| O.M.B./Purchasing | _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> | <u>[Signature]</u> | _____ |
| County Attorney | <u>12/6/05</u> | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | <u>[Signature]</u> | <u>12/1/05</u> |
| Comments: _____ | | | | |

AMENDMENT TO AGREEMENT

This Amendment to Agreement is made and entered into this 21st day of December, 2005, between the BOARD OF COUNTY COMMISSIONERS OF MONROE COUNTY, FLORIDA, hereinafter referred to as "COUNTY," and The Guidance Clinic of the Middle Keys, Inc., hereinafter referred to as "PROVIDER."

WHEREAS, the COUNTY and the PROVIDER entered into an agreement on October 19, 2005, regarding the provision of mental health services, including sub-contracted Baker Act and Marchman Act transportation services, for citizens of Monroe County; and

WHEREAS, PROVIDER has negotiated a new sub-contract for Baker Act and Marchman Act transportation services, and,

WHEREAS, the COUNTY desires to amend said agreement to include the new Baker Act and Marchman Act transportation sub-contract; NOW, THEREFORE,

1. The contract is amended by substituting the Baker Act and Marchman Act contract document dated October 1, 2005 as Attachment D in place of the contract document dated September 15, 2005.
2. All other provisions of the contract dated October 19, 2005, not inconsistent herewith, remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have caused these presents to be executed as of the day and year first written above.

(SEAL)

ATTEST: DANNY L. KOLHAGE, CLERK

BOARD OF COUNTY COMMISSIONERS
OF MONROE COUNTY, FLORIDA

By _____
Deputy Clerk

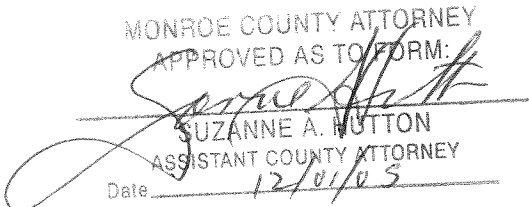
By _____
Mayor/Chairman

Guidance Clinic of the Middle Keys, Inc.,

(Federal ID No. _____)

By _____

Name and Title

MONROE COUNTY ATTORNEY
APPROVED AS TO FORM:

SUZANNE A. MUTTON
ASSISTANT COUNTY ATTORNEY
Date 12/01/05

GUIDANCE CLINIC OF THE MIDDLE KEYS, INC.
3000 41ST STREET, OCEAN
MARATHON, FL 33050
(v) 305/434-9000 / (f) 305/434-9040

October 1, 2005

Evan Guttman
Elanjess LLC
800 Catherine Street
Key West, FL 33040

RE: LETTER OF AGREEMENT

Dear Mr. Guttman:

The Guidance Clinic of the Middle Keys, Inc. (GCMK), hereby enters into an agreement with Elanjess LLC to provide coordination and transportation services for Baker Act/Marchman Act (BA/MA) clients throughout Monroe County and to/from Miami-Dade County as required. The effective term of this agreement is October 1, 2005-September 30, 2006.

GCMK will supply Elanjess with two vehicles, one Chevrolet Caprices meeting Elanjess maintenance specifications; to be stationed in Key West at an Elanjess location and a Ford Taurus to be stationed in Marathon at GCMK headquarters.

GCMK will pay for the fuel and maintenance of the two vehicles used for BA/MA transportation. Elanjess will coordinate the maintenance for the Caprice located in Key West. Invoices for routine maintenance (labor and parts) on the Caprice will be forwarded to GCMK Transportation Director for payment. Elanjess will not charge an extra fee for coordinating the maintenance of the vehicle. Elanjess must obtain prior approval from the GCMK Transportation Director to initiate major vehicle repairs. GCMK will coordinate the maintenance for the Taurus located in Marathon.

GCMK will maintain insurance on the Caprice and Taurus. Elanjess will be named as an "additional insured" for these two cars. Elanjess will report and document accidents involving GCMK vehicles and incidents involving clients to the proper authorities and immediately thereafter contact GCMK.

All Elanjess drivers operating GCMK vehicles will hold a minimum of a Class D Florida Driver's License and be approved for GCMK insurance coverage. Upon execution of this agreement, Elanjess will fax to GCMK Transportation Director a current list of drivers - including a copy of the driver's license and social security number for each driver - for approval to operate GCMK vehicles. Prior to adding a driver, Elanjess will fax to GCMK Transportation Director or designee a copy of the driver's license and

social security number of the person. GCMK will initiate procedures to add the driver to GCMK vehicle insurance. Elanjess cannot use the driver until it has received written notification that the driver has been added to the GCMK insurance coverage. Additionally, Elanjess will fax a copy of picture identification and social security number for each escort to GCMK Transportation Director or designee. Elanjess cannot use the escort until it has received written notification that the escort has been approved by GCMK.

GCMK will supply Elanjess with a cell phone. Elanjess will follow the transportation protocol and complete the documentation provided as Attachment 1-3 herein.

The following fee structure is established for the period of the agreement:

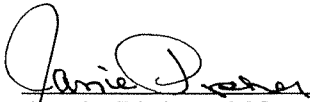
| Maximum # Roundtrips* | Client Pickup Point | Client Drop-off Point | Elanjess Payment | |
|--|---------------------|------------------------|-----------------------|---------------------|
| 300 | Key West | Key West | \$115 | |
| | Marathon | Marathon | \$115 | |
| | Key West | Marathon | \$145 | |
| | Marathon | Key West | \$145 | |
| | Marathon | Key Largo | \$145 | |
| 40 | Marathon | Miami-Dade County | \$385 | |
| | Key Largo | Miami-Dade County | \$385 | |
| 25 | Key West | Miami-Dade County | \$385 | |
| GCMK Preauthorization Required for All Trips Below | | | | |
| Approval for below fees will be granted only when the Marathon BA/MA vehicle is engaged with another BA/MA trip that would preclude another pickup within a reasonable period of time. | | | | |
| Maximum # Roundtrips | Car Location | Client Pickup Point | Client Drop-off Point | Elanjess Payment |
| 3 | Key West | Marathon & North | Key Largo | \$225 |
| 5 | Key West | Marathon & North | Miami-Dade County | \$385 |

Timely payment for services rendered is ensured by adherence to the following invoicing procedures:

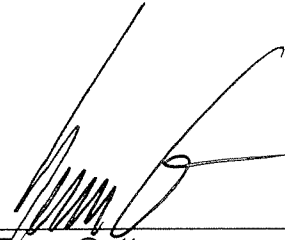
- Elanjess will submit two statements/invoices per month; one covering the trips made from the first through the fifteenth and one covering trips made from the sixteenth through the end of the month. Elanjess will send statements/invoices to GCMK within 5 business days after the end of the billing period.
- Elanjess will include required documentation with each statement/invoice.
- Elanjess statements/invoices for BA/MA trips will be submitted to the attention of GCMK Stabilization Unit Director.
- GCMK Stabilization Director will review statement/invoice, mediate any discrepancies with Elanjess, and forward approved invoice to GCMK Finance Department.
- GCMK will mail payment to Elanjess within 7 working days (Finance Department) upon receipt of statement/invoice by the Stabilization Unit Director.

This agreement will begin on October 1, 2005 and will terminate on September 30, 2006. The agreement can be cancelled by either party with 60 days written notice.

GCMK and Elanjess enter into this agreement including Attachments 1-3 by affixing signatures below:



Jamie Pipher, MS
Vice President of Operations, GCMK



Evan Guttman
Elanjess LLC

Attachments:

1. GCMK Transportation Protocol
2. GCMK Transportation Record and Payment Authorization Sheet
3. Statement

ATTACHMENT 1

GUIDANCE CLINIC OF THE MIDDLE KEYS TRANSPORTATION PROTOCOL: THE TRANSPORTATION OF BAKER ACT AND MARCHMAN ACT CLIENTS

A. Client Related Rules:

1. Confidentiality of a client and client related information shall be maintained at all times.
2. Each client shall be treated with respect and dignity at all times.
3. No information with client information shall be leave the clinic unless part of a client transfer packet to a designated facility. (No driver/escort shall maintain a personal copy of the Transportation Record and Payment Authorization Sheet.)
4. Client transportation within Monroe County may be conducted with a driver and an escort.
5. Client transportation outside of Monroe County must be made with one driver and one escort.
6. A client must be observed for any unusual behaviors including hurting self/others or sudden medical conditions. Report/respond to conditions immediately to the Nurse on Duty.
7. At the time of pick up for a Baker Act or Marchman Act client, a driver must obtain the original Baker Act or Marchman Act paper work from the Pick Up facility. If the original paper work is not available the driver must immediately report this information to the GCMK Nurse on Duty for further instructions.
8. A female client requires a female escort or a female driver.
9. A parent is not allowed to travel in the Baker Act vehicle with a Baker Act or Marchman Act minor. Parents may follow in another car.
10. Only one client may be transported at a time in the Baker Act vehicle.
11. Clients are not to smoke in the car.
12. Clients are not to be placed in handcuffs or any type of restraints for any reason by a driver or escort – or to be placed in the vehicle by others (i.e. Law Enforcement) in handcuffs or any type of restraints
13. A client's movement is not to be impeded with any physical restraint unless directed by a nurse/MD/law enforcement officer.
14. If a client is violent during transport and poses a treat to safety, stop the vehicle and call 911, than notify the Nurse on Duty of the situation.
15. A client shall not be left alone in the vehicle during the trip for any reason.
16. A client shall be under the observation of the driver or escort at all times during the transport.
17. Client is encouraged to use restroom facilities prior to departure. If the trip is generated from Key West and a stop is required, the GCMK may be used for that purpose.
18. A client may not use aluminum/metal cans. Items for drinking shall be provided only in a plastic container.
19. Clients may not have any metal utensils, glass or other hard products such as

- pencils or pens.
20. A client may not shop during a stop. All efforts should be made to avoid stops. If a stop is required, it should be short and without delay.
 21. If a client must use a public facility, the client must be escorted to the restroom and the driver must remain outside the restroom door until the client leaves the restroom. The driver will remain in conversation with client while the client is in the restroom.

B. Coordination of Transportation Rules:

1. Transportation arrangements for Baker Act and Marchman Act clients are under the direction of the Unit Nurse on Duty/GCMK per contractual arrangement Elanjess LLC. No other agency is authorized to contact Elanjess directly for transportation.
2. Final decision for a driver to transport is made by the nurse on duty. The nurse may request a BAL be conducted or send a drivers/escort home if he/she has a concern.
3. All trips will be made within the approved fee structure.
4. All trips will be made using the closest vehicle and the shortest distance unless preauthorization is obtained from the Unit Nurse on Duty at the GCMK.
5. Clients may be picked up at only approved locations. The GCMK Nurse on Duty will communicate the pick up location. Approved locations will include:
Hospitals, Detention Facility
Mental Health Clinics, Anchor Away
With a GCMK staff member
6. At Depoo: Call security with phone located on the first floor.
7. At GCMK: Use the telephone call box next to the elevator.
8. At GCMK, staff members shall place the client in the vehicle for departure and will assist the client from the vehicle at time of arrival.
9. The facility responsible for the departing client for a trip longer than 2 hours shall provide a brown bag snack. All minors shall be supplied with a snack for any trip over 1 hour.
10. When a driver reports a client is too dangerous to transport, the nurse on duty shall work with the Sheriff's department to transport the client the client to the nearest emergency room.
11. If a client absconds at time of or during transport, immediately report the information to the GCMK Nurse on Duty. Do not go after the client.
12. "Jail Hold" clients from the Monroe County Detention Facility shall be picked up from the Sallyport area only. To access the Sallyport area, the driver must drive the car within 1 foot of the Sallyport entrance. If the door does not open, the escort must use the speaker mounted on the wall next to the Sallyport entrance to request entrance. Once inside, Detention Facility staff will bring the client to the car. When the client is inside the car and the doors are locked, the Sallyport area exit doors will open.
13. The driver/escort must determine from the Pick Up facility if the client has been searched and encourage staff to conduct a search prior to transport. If

the client is not searched prior to transport, the driver must communicate this information to the Duty Staff Member prior to opening the client door at the Designation point.

14. Driver/escort must respond to the pick up point within 1 hour and 15 minutes.

C. Reimbursement related rules

1. All cancelled and otherwise diverted trips will be reported on the Transportation Record and Payment Authorization Sheet.
2. Transportation Record and Payment Authorization Sheets and a Statement of services rendered will be faxed to the Stabilization Unit Director on the first and sixteenth of each month.
3. If the driver arrives without the original Baker or Marchman Act paperwork, Elanjess will obtain the paper work without charge to the GCMK.

GUIDANCE CLINIC OF THE MIDDLE KEYS
3000 41ST ST. Ocean
Marathon, FL 33050
Voice 305-434-9000 • Fax 305-434-9040

TRANSPORTATION RECORD AND PAYMENT AUTHORIZATION SHEET

Transportation Type: ☐ Baker Act ☐ Marchman Act

Date: _____ Client Name: _____ DOB: _____

Time Called: _____ Time of Pick Up: _____

Time of Drop Off: _____ Time van returned to Duty: _____

Vehicle: _____ KW vehicle _____ Mar vehicle

Place of Pick Up: _____
(Where did you pick up the Client: Facility Name/City)

Authorized Staff Signature at Pick Up Facility: _____ Time: _____

Destination: _____
(Where did you take the Client: Facility Name/City)

Authorized Staff Signature at Designation Facility: _____ Time: _____
(Staff member accepting client)

Driver Name: _____

Escort Name: _____

Beginning Miles: _____ Pick Up Miles: _____

Drop Off Miles: _____ Ending Miles: _____

FOR GCMK USE ONLY:

Amount to be paid: _____

Stabilization Unit Director Signature: _____

ATTACHMENT 3

Statement

Date:

Elanjess LLC
800 Catherine St.
Key West, Florida 33040

Stabilization Unit Director
Guidance Clinic of the Middle Keys
3000 41st St. Ocean
Marathon, FL 33050

Re: Baker Act and Marchman Act transportation

The following is a break down for trips from _____ to _____.

[illegible]

Elanjess LLC Representative Signature

GCMK CFO Signature

BACK-UP INFO - PRIOR Attachment D

GUIDANCE CLINIC OF THE MIDDLE KEYS, INC.
3000 41ST STREET, OCEAN
MARATHON, FL 33050
(v) 305/434-9000 / (f) 305/434-9040

September 15, 2005

Darren Guttman
Elanjess LLC a.k.a. Jessrica Corp.
800 Catherine Street
Key West, FL 33040

RE: LETTER OF AGREEMENT

Dear Mr. Guttman:

The Guidance Clinic of the Middle Keys, Inc. (GCMK), hereby enters into an agreement with Elanjess LLC to provide coordination and transportation services for Baker Act/Marchman Act (BA/MA) clients throughout Monroe County and to/from Miami-Dade County as required. The effective term of this agreement is October 1, 2005 -September 30, 2006.

GCMK will transfer ownership of the 1995 Chevrolet Caprice to Elanjess. Elanjess will supply an additional car with the same safety features. One vehicle will be stationed in Key West at an Elanjess location and the other will be stationed in Marathon in a designated parking space at GCMK headquarters.

GCMK will continue to be responsible for the cost of fuel and Elanjess will be responsible for any and all upkeep and maintenance of the two vehicles used for BA/MA transportation. Elanjess is also responsible for tolls, cell phone/beeper and vehicle insurance expenses. Elanjess will not charge an extra fee for coordinating the maintenance of the vehicle.

Elanjess will maintain ownership and insurance on both of the designated vehicles and GCMK will be named as an "additional insured" for both cars on Elanjess's vehicle policy. All Elanjess drivers operating designated BA/MA vehicles will meet Florida State license requirements.

Elanjess will ensure the minimum liability insurance requirement of \$100,000 per person and \$200,000 per incident. Elanjess will report and document accidents and incidents involving clients to the proper authorities and immediately thereafter contact GCMK.

Elanjess will supply a designated cell phone for each of the two Baker Act vehicles. Elanjess drivers will have one of these cell phones available for each BA/MA run. Elanjess will communicate the cell phone number to GCMK's Charge Nurse that will be used during each BA/MA run. Elanjess will follow the most current copy of the Transportation Protocol and complete the documentation provided as Attachment 1-3 herein.

The following fee structure is established for the period of the agreement:

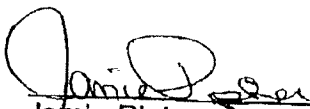
| Maximum # Roundtrips* | Client Pickup Point | Elanjess Payment Per Trip |
|--------------------------|-------------------------|------------------------------|
| 325 | ANY In-County Trips | \$140 |
| 85 | ANY Out-of-County Trips | \$430 |


Timely payment for services rendered is ensured by adherence to the following invoicing procedures:

- Elanjess will submit two Statements per month; one covering the trips made from the first through the fifteenth and one covering trips made from the sixteenth through the end of the month. Elanjess will send Statements to GCMK within 5 business days after the end of the billing period.
- Elanjess will include the required Transportation Record and Payment Authorization Sheet for each trip indicated on the Statement.
- Elanjess Statements for BA/MA trips will be submitted to the attention of GCMK Stabilization Unit Director.
- GCMK's Stabilization Director will review Statement, mediate any discrepancies with Elanjess, and forward approved invoice to GCMK's Finance Department.
- GCMK (Finance Department) will mail payment to Elanjess within 7 working days upon receipt of Statement by the Stabilization Unit Director.

This agreement will begin on October 1, 2005, and will terminate on September 30, 2006. The agreement can be cancelled by either party with 60 days written notice.

GCMK and Elanjess enter into this agreement including Attachments 1-3 by affixing signatures below:


 Jamie Pipher, MS
 Vice President of Operations, GCMK


 Darren Guttman
 Elanjess LLC

Attachments:

1. GCMK Transportation Protocol
2. GCMK Transportation Record and Payment Authorization Sheet
3. Statement

ATTACHMENT 1

GUIDANCE CLINIC OF THE MIDDLE KEYS TRANSPORTATION PROTOCOL:
THE TRANSPORTATION OF BAKER ACT AND MARCHMAN ACT CLIENTS

A. Client Related Rules:

1. Confidentiality of a client and client related information shall be maintained at all times.
2. Each client shall be treated with respect and dignity at all times.
3. No information with client information shall leave the clinic unless part of a client transfer packet to a designated facility. (No driver/escort shall maintain a personal copy of the Transportation Record and Payment Authorization Sheet.)
4. All drivers and escorts must be approved by the Transportation Department of the GCMK prior to accepting a driving assignment.
5. Client transportation within Monroe County may be conducted with a driver and an escort.
6. Client transportation outside of Monroe County must be made with one driver and one escort.
7. A client must be observed for any unusual behaviors including hurting self/others or sudden medical conditions. Report/respond to conditions immediately to the Nurse on Duty.
8. At the time of pick up for a Baker Act or Marchman Act client, a driver must obtain the original Baker Act or Marchman Act paper work from the Pick Up facility. If the original paper work is not available the driver must immediately report this information to the GCMK Nurse on Duty for further instructions.
9. A female client requires a female escort or a female driver.
10. A parent is not allowed to travel in the Baker Act vehicle with a Baker Act or Marchman Act minor. Parents may follow in another car.
11. Only one client may be transported at a time in the Baker Act vehicle.
12. Clients are not to smoke in the car.
13. Clients are not to be placed in handcuffs or any type of restraints for any reason by a driver or escort.
14. A client's movement is not to be impeded with any physical restraint unless directed by a nurse/MD/law enforcement officer.
15. If a client is violent during transport and poses a treat to safety, stop the vehicle and call 911, then notify the Nurse on Duty of the situation.
16. A client shall not be left alone in the vehicle during the trip for any reason.
17. A client shall be under the observation of the driver or escort at all times during the transport.
18. Client is encouraged to use restroom facilities prior to departure. If the trip is generated from Key West and a stop is required, the GCMK may be used for that purpose.
19. A client may not use aluminum/metal cans. Items for drinking shall be provided only in a plastic container.
20. Clients may not have any metal utensils, glass or other hard products such as

pencils or pens.

21. A client may not shop during a stop. All efforts should be made to avoid stops. If a stop is required, it should be short and without delay.
22. If a client must use a public facility, the client must be escorted to the restroom and the driver must remain outside the restroom door until the client leaves the restroom. The driver will remain in conversation with client while the client is in the restroom.

B. Coordination of Transportation Rules:

1. Transportation arrangements for Baker Act and Marchman Act clients are under the direction of the Unit Nurse on Duty/GCMK per contractual arrangement Elanjess LLC . No other agency is authorized to contact Elanjess directly for transportation.
2. Final decision for a driver to transport is made by the nurse on duty. The nurse may request a BAL be conducted or send a drivers/escort home if he/she has a concern.
3. All trips will be made within the approved fee structure.
4. All trips will be made using the closest vehicle and the shortest distance unless preauthorization is obtained from the Unit Nurse on Duty at the GCMK.
5. Clients may be picked up at only approved locations. The GCMK Nurse on Duty will communicate the pick up location. Approved locations will include:
 - Hospitals
 - Detention Facility
 - Mental Health Clinics
 - Anchor Away
 - With a GCMK staff member
6. At DePoo: Call security with phone located on the first floor.
7. At GCMK: Use the telephone call box next to the elevator.
8. At GCMK, staff members shall place the client in the vehicle for departure and will assist the client from the vehicle at time of arrival.
9. The facility responsible for the departing client for a trip longer than 2 hours shall provide a brown bag snack. All minors shall be supplied with a snack for any trip over 1 hour.
10. When a driver reports a client is too dangerous to transport, the nurse on duty shall work with the Sheriff's department to transport the client the client to the nearest emergency room.
11. If a client absconds at time of or during transport, immediately report the information to the GCMK Nurse on Duty. Do not go after the client.
12. "Jail Hold" clients from the Monroe County Detention Facility shall be picked up from the Sallyport area only. To access the Sallyport area, the driver must drive the car within 1 foot of the Sallyport entrance. If the door does not open, the escort must use the speaker mounted on the wall next to the Sallyport entrance to request entrance. Once inside, Detention Facility staff will bring the client to the car. When the client is inside the car and the doors are locked, the Sallyport area exit doors will open.
13. The driver/escort must determine from the Pick Up facility if the client has been searched and encourage staff to conduct a search prior to transport. If the client

- is not searched prior to transport, the driver must communicate this information to the Duty Staff Member prior to opening the client door at the Designation point.
14. Driver/escort must respond to the pick up point within 1 hour and 15 minutes.

C. Reimbursement related rules

1. All cancelled and otherwise diverted trips will be reported on the Transportation Record and Payment Authorization Sheet.
2. Daily inspection checklist will be maintained for all Baker Act vehicles and sent monthly to the GCMK Transportation Coordinator.
3. Transportation Record and Payment Authorization Sheets and a Statement of services rendered will be faxed to the Stabilization Unit Director on the first and sixteenth of each month.
4. If the driver arrives without the original Baker or Marchman Act paperwork, Elanjess will obtain the paper work without charge to the GCMK.

ATTACHMENT 2

GUIDANCE CLINIC OF THE MIDDLE KEYS
3000 41ST ST. Ocean
Marathon, FL 33050
Voice 305-434-9000 • Fax 305-434-9040

TRANSPORTATION RECORD AND PAYMENT AUTHORIZATION SHEET

Transportation Type: ☐ Baker Act ☐ Marchman Act

Date: _____ Client Name: _____ DOB: _____

Time Called: _____ Time of Pick Up: _____

Time of Drop Off: _____ Time van returned to Duty: _____

Vehicle: ☐ KW Caprice ☐ Mar Caprice ☐ Crown Victoria

Place of Pick Up: _____
(Where did you pick up the Client: Facility Name/City)

Authorized Staff Signature at Pick Up Facility: _____ Time: _____

Destination: _____
(Where did you take the Client: Facility Name/City)

Authorized Staff Signature at Designation Facility: _____ Time: _____
(Staff member accepting client)

Driver Name: _____

Escort Name: _____

Beginning Miles: _____ Pick Up Miles: _____

Drop Off Miles: _____ Ending Miles: _____

FOR GCMK USE ONLY:

Amount to be paid: _____
Stabilization Unit Director Signature: _____

